



CITY OF TILLAMOOK LAND USE APPLICATION



**REFER TO CITY CODE OF ORDINANCES – §153.003 LAND USE APPLICATION PROCEDURES
AND FEES FOR DETAILS - CITY WEBSITE – www.tillamookor.gov**

For Planning Department Use Only:

Date Received: _____ Type of Land Use Request: _____

Date Determined Complete: _____

Hearing Date and Time: _____

(Hearing Date to be determined after application deemed complete)

City No: _____ Paper Notice (to be billed): _____

Fees: _____ Mailings (to be billed): _____

Receipt No: _____

Attachments Received: _____ Address List _____ Affidavit of Mailing
_____ Site Plan _____ Affidavit of Posting
_____ Narrative Addressing the Applicable Criteria

Will SDC fees be required for this property? ☐ Yes ☐ No

Public Works permit required? ☐ Yes ☐ No Sign permit required? ☐ Yes ☐ No

Business License required? ☐ Yes ☐ No

Reference permit(s) or license number(s) _____

APPLICANT: Please complete the remainder of this application

Applicant: Name (s): _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Home: _____

Location Info: Tax Lot: _____ Section: _____ Township 1S Range: _____

Site Zoning: _____ Situs Address: _____

Is this property located in a wetland area ☐ **Yes** ☐ **No?**

Is the site within a Flood Hazard Area ☐ **Yes** ☐ **No?**

Is site within or partially located within a Water Resource Protection Overlay (WRPO) ☐ **Yes** ☐ **No**

Parcel Size: _____ Dimensions: _____ Square Footage: _____

Are there any other pending city permits? (Public Works, etc.) if so, list them here:

Have you had any other Land Use actions on this property? _____

If so, please explain: _____

Specifications of Request: _____

As the applicant(s) of the property described, I/we realize that this application rests upon the above answers and accompanying data, and do hereby affirm and certify under penalty of perjury that the foregoing statements and answers are in all respects true and correct to the best of my/our knowledge.

APPLICANT(S):

_____ Applicant Name Printed	_____ Signature	_____ Date
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_____ Applicant Name Printed	_____ Signature	_____ Date
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_____ Applicant Name Printed	_____ Signature	_____ Date
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_____ Applicant Name Printed	_____ Signature	_____ Date
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IF THE APPLICANT LISTED ON THE APPLICATION IS OTHER THAN THE SOLE DEED HOLDER OF THE PROPERTY OR PROPERTIES DESCRIBED ABOVE, COMPLETE THE FOLLOWING AUTHORIZATION TO ACT AS AGENT.

I/WE, THE UNDERSIGNED, HEREBY CERTIFY THAT AS DEED HOLDER(S) OF RECORD OF THE PROPERTY OR PROPERTIES DESCRIBED ABOVE, I/WE HEREBY AUTHORIZE THE PERSON LISTED ON THIS APPLICATION TO ACT AND APPEAL AS AGENT WITH RESPECT TO THIS APPLICATION. I/WE ALSO GRANT PERMISSION TO THE APPLICANT TO ERECT A PUBLIC NOTICE SIGN ON THE SUBJECT PROPERTY FOR PUBLIC INFORMATION PURPOSES.

_____ Owner Name Printed	_____ Signature	_____ Date
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_____ Owner Name Printed	_____ Signature	_____ Date
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_____ Owner Name Printed	_____ Signature	_____ Date
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_____ Owner Name Printed	_____ Signature	_____ Date
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Mailing Address

City, State, & Zip Code



210 Laurel Avenue • Tillamook, OR 97141
phone 503-374-1836 • fax 503-842-3445

OWNER'S AUTHORIZATION LETTER

This form shall be submitted with the following applications where (2) or more property owners are involved: Partition, Property Line Adjustment and Subdivision in compliance with the following sections of City of Tillamook Zoning code: 153.072.3.D; 153.172.4.C.2.a; and 153.072.5.C

I/we hereby certify that I/we am/are the owner(s) of the described property below. I/we am/are respectfully requesting processing and approval of the above referenced permit(s) review. I/we hereby authorize the Applicant listed on this application to act on my/our behalf during the processing and presentation of this request. They shall be the principal contact with the City in processing this application.

Property Address

City, State, Zip

TWP: ____ RNG: ____ SEC: ____ TAXLOT: _____

Owner's Signature

Date

Printed Name

Property Address

City, State, Zip

TWP: ____ RNG: ____ SEC: ____ TAXLOT: _____

Owner's Signature

Date

Printed Name

Sworn and subscribed before me this _____ day of _____, 20____

Notary Public in and for the State of Oregon

My commission expires on: _____

ACKNOWLEDGEMENT OF MAILING LIST

STATE OF OREGON)
COUNTY OF TILLAMOOK) SS.
CITY OF TILLAMOOK)

I, _____, _____,
(Print Name Here) (Print Address Here)

do hereby certify that on the _____ day of _____, 20____,
I submitted with my application such names and addresses and tax lot numbers
as are listed on the last preceding tax role of the Assessor of Tillamook County.

That said list contains a true copy of all property owners within 250/400 feet of the subject property. (circle one depending on application type) (Section 153.003.A and B)

Dated this _____ day of _____, 20____.

Applicant's Signature

SUBSCRIBED AND SWORN TO BEFORE ME THIS ____ DAY OF _____, 20__.

Notary Public for Oregon

My Commission Expires: _____

INSTRUCTIONS FOR MAILING LIST

The required list of tax lots and property owners shall be completed as an attached form and shall list in order: 1) Tax Lot number, 2) Property owner name, 3) Street address, 4) City, State and Zip Code. (CCT §153.003 LAND USE APPLICATION PROCEDURES AND FEES)

3720 B.I.D. 220 Avenue J Tillamook, OR 97141	3719 Ruth Teasdel 661 Spring Street Bay City, OR 97107	3718 Frank Eberlein PO Box 228 Garibaldi, OR 97118
3717 L.N. Jones PO Box 1865 Tillamook, OR 97141	3716 Lorna Jensen 79 High Street Bay City, OR 97107	3715 P.L. Anner 210 Laurel Avenue Tillamook, OR 97141
3714 Jack Schulze PO Box 1462 Netarts, OR 97143	3713 Bob Rocrate 201 Laurel Avenue Tillamook, OR 97141	

Note: The List must be copied onto mailing labels, so please type or print legibly.
Please attach the map from the county showing the radius that was used to determine
which recipients were chosen

ACKNOWLEDGEMENT OF POSTING

STATE OF OREGON)
COUNTY OF TILLAMOOK) SS.
CITY OF TILLAMOOK)

I, _____, _____,
(Print Name Here) (Print Address Here)

do hereby certify that 20 days prior to the first Planning Commission hearing, I will post the property referred to in this application with the time, location, nature of request and date of the scheduled public hearing. (as per requirements in Chapter 153.003.14)

Dated this _____ day of _____, 20____.

Applicant's Signature

SUBSCRIBED AND SWORN TO BEFORE ME THIS ____ DAY OF _____, 20__.

Notary Public for Oregon

My Commission Expires: _____

**** Sign shall be posted a minimum of twenty (20) days before the scheduled public hearing. (CCT §153.003 LAND USE APPLICATION PROCEDURES AND FEES)**

TO BE POSTED IN A MANNER CLEARLY VISIBLE ON THE SUBJECT PROPERTY WITHIN TEN (10) FEET OF WHATEVER BOUNDARY LINE OF SUCH LAND ABUTS EACH PUBLIC ROAD OR STREET. IF NO PUBLIC ROAD ABUTS THEREON, THEN SUCH SIGN SHALL FACE IN SUCH AMANNER AS MAY BE READILY SEEN BY THE PUBLIC.

LAND USE REQUEST

REQUEST: _____

DATE: _____

TIME: **7:00 P.M.**

PLACE: **CITY HALL, 210 LAUREL AVE.**

THIS SIGN SHALL BE PLACED AT THE SUBJECT PROPERTY PER SECTION 10 (12) OF ZONING ORDINANCE #979.
THIS POSTING SHALL REMAIN ON SITE FOR A MINIMUM PERIOD OF TWENTY DAYS PRIOR TO THE PLANNING
COMMISSION MEETING WITH THE APPLICANT RESPONSIBLE FOR SUCH POSTING AND MAINTENNANCE.

The Sign shall be provided by the City of Tillamook to the applicant after the signing and notarizing of the "Acknowledgement of Posting" has taken place.

This sign shall be placed at the subject property in a manner clearly visible within ten (10) feet of whatever boundary line of such land abuts each public road or street. If no public road abuts thereon, then such sign shall face in such a manner as may be readily seen by the public.

The posting shall remain onsite for a minimum period of twenty (20) days prior to the Planning Commission meeting with the applicant responsible for such posting and maintenance.